**COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
Public Health**

Report Card

Objective Area 1: *Use of Data and Evidence to Improve Quality*

	2004 Observed - PH	2004 Benchmark - PH	2003 Baseline - PH
1. Percent of programs that use population-based data for LA County to guide their planning and monitoring activities.[a]	___	___	___
2. Evidence-based interventions:			
- Percent of program directors/management staff that have participated in training [b]	___	___	___
- Percent of programs that have systematically reviewed the literature and prioritized effective interventions [c]	___	___	___
- Percent of programs that are currently using evidence-based interventions [d]	___	___	___
3. Percent of programs that have approved:			
- Mission and Vision statements [e]	___	___	___
- Population goals and indicators [f]	___	___	___
- Performance goals and performance measures [g]	___	___	___
4. Proportion of targeted[h] Public Health units that are connected to the VCMR (electronic disease-reporting) [i]	___	___	___
Proportion of targeted Public Health units that are currently using data from the VCMR [j]	___	___	___

Objective Area 2: *Communication, Planning, and Technology*

	2004 Observed - PH	2004 Benchmark - PH	2003 Baseline - PH
5. Percent of CORE programs that have completed Phase I and Phase II of the SPA improvement process [k]	___	___	___
6. Percent of programs that have effective partnerships: [l]			
- Internal partnerships (program-program)	___	___	___
- External partnerships (program-community)	___	___	___
7. Percent of programs that have a website accessible to the public through www.lapublichealth.org [m]	___	___	___
Percent of programs whose directors have verified that their website is current [m]	___	___	___

Objective Area 2 *(continued)*

	2004 Observed - PH	2004 Benchmark - PH	2003 Baseline - PH
8. Percent of programs that have:			
- Completed "Service During Tough Times" training	___	___	___
- Developed all "Service Scripts" to assure consistency of information [n]	___	___	___

Objective Area 3: *Resource Utilization*

	2004 Observed - PH	2004 Benchmark - PH	2003 Baseline - PH
9. Percent of programs that have had one or more staff complete leadership training [o]	___	___	___
Percent of Program Directors who have completed leadership training	___	___	___
10. Percent of programs whose employees' Performance Evaluations were completed on-time [p]	___	___	___
11. Percent of employees who have completed "Core Functions of Public Health" training [q]	___	___	___
Percent of programs that have had one or more staff complete "Core Functions of Public Health" training	___	___	___
12. Progress toward achieving appropriate classifications for Public Health needs: [r]			
- A working group identified and convened.	___	___	
- Problem defined	___	___	
- Plan developed (including a timeline)	___	___	
- Plan implemented, including on-going evaluation	___	___	
13. Percent of vacant items not filled within 6 months [s]	___	___	___
- Grant-funded, Manager/Supervisor	___	___	___
- Grant-funded, Line Staff	___	___	___
- Net County Cost, Manager/Supervisor	___	___	___
- Net County Cost, Line Staff	___	___	___

See Notes on reverse.

The Public Health Report Card.

The Report Card is a tool to track performance in areas that affect all or nearly all units within the organization. The thirteen (13) elements reported on the card are organized into three objective areas, as listed below. The numbers below correspond with the numbered elements on the Report Card. For each, a rationale is provided (in box). In addition, lettered notes provide information on criteria or interpretation.

Objective Area 1 - _Use of Data and Evidence to Improve Quality_. Emphasis on data to improve performance and to guide decision-making is increasing.

1. Prioritization of _efforts must be based on indicators that are population-based_ (ie, that reflect the actual rate of health problems in specific populations).

[a] Requires written documentation in the program's PH measures document of the major source(s) of population-based data used in formulating population goals and indicators.

2. Using _evidence-based interventions_ (ie, based on the best available evidence) and following an evidence-based approach to decision-making are becoming the standard within clinical and public health practice.

[b] Requires documentation of training sponsor and year.

[c] Requires written documentation of literature sources (3 or more), interventions selected and prioritized.

[d] Requires specification of date of implementation of top-priority intervention(s).

3. As part of a "Public Health Measures" initiative, all programs must have mission and vision statements, a systematic description of population goals and indicators, as well as specific performance goals that relate to and, hopefully, will impact on population-level outcomes.

[e] Mission and Vision statements are updated or verified as current on an annual basis, pending approval by the Director of Public Health, LA County.

[f] Population goals and indicators refer to broad population outcomes which the program is attempting to improve. Generally, the responsibility for improvement is shared with other organizations within the community. Population goals and indicators are updated annually and submitted to the Director of Public Health for approval.

[g] Performance goals and measures refer to activities and services provided directly by the program. As such, the program has complete accountability for accomplishment of these goals. Performance goals and measures are approved by the Director of Public Health and updated annually.

4. An ability to respond to urgent health problems requires some programs to have access to and use data provided by the new electronic version of the Confidential Morbidity Report, known as the _Visual CMR_ (VCMR).

[h] Public Health units targeted for inclusion are Acute Communicable Disease Control, Sexually Transmitted Diseases, Tuberculosis Control, HIV Epidemiology, Health Assessment and Epidemiology, Veterinary Public Health, Injury and Violence Preventive Program, Immunization Program, Environmental Health, Toxics Epidemiology, Pesticides, Lead Program and Public Health Nursing in the Service Planning Areas.

[i] Connection to the system of each targeted program will be verified by the VCMR grant administrator.

[j] Requires written documentation from the program of how the received data/reports are used.

Objective Area 2 - _Communication, Planning, and Technology_. Internal and external communication processes are key to organizational effectiveness. Key elements are reflected in the three measures selected.

5. _Service Planning Area (SPA) improvement_. Coordination of planning between central CORE programs and the geographically accountable SPAs is a key element for successful service delivery.

[k] CORE programs include the Alcohol and Drug Program; Environmental Health; Maternal, Child, and Adolescent Health; Office of AIDS Programs and Policy; Children's Medical Services). SPA staff may include other additional ("optional") programs in their planning effort, based on local priorities. Discussion between SPA and CORE/optional program staffs constitutes Phase I of the process. Phase II requires Phase I participants to include community members in the planning process. The Area Health Officer for each SPA will confirm when effective coordination is established at either the Phase I or II level.

6. _Effective partnerships_. Efficient, effective use of resources requires partnering with others both within and outside of our own organization.

[l] Requires documentation that specifies partnerships (internal and external), goals, and status of joint effort.

7. Maintaining _up-to-date websites_ that contain current, high quality information greatly increases our ability to communicate effectively with many internal and external customers.

[m] Web site content must be verified as current twice annually and must include, as a minimum, the following information: "About Us", "Contacts", "FAQs", "Reports", and "Links".

8. Using effective communication strategies during the current period of fiscal tightening (_Tough Times_) is very important to sustaining customer relations.

[n] The office of Organizational Development and Training will validate which programs have completed the required training, to include development of specific "messages" ("service scripts") that address program-specific issues.

Objective Area 3 - _Resource Utilization_. Recruitment and sustained development of the personnel within our organization is a cornerstone of optimal organizational performance.

9. Willingness to change is required for an organization that pursues excellence and relevance. Continual investment in leadership (_PH Institute_) pays dividends in the organization's abilities to manage and sustain a reasonable pace of change. The Los Angeles Public Health (LAPH) Institute is providing a training program for leaders within LA Public Health.

[o] The primary goal is to have all Program Directors complete this training by the end of CY 2004, as validated by the office of Organizational Development and Training.

10. Taking care of one's own personnel must be at the top of every supervisor's priority list. Completing _performance evaluations_ on-time is a key indicator of how serious we are in this effort.

[p] The goal for each program is to complete all employee evaluations on-time. Data from Human Resources will validate which programs meet this goal.

11. Training in the _Core Functions of Public Health_ (assessment, policy development, and assurance) increases organizational awareness of how various activities are inter-connected. This training also helps staff members to visualize more possibilities in how to approach current public health issues.

[q] The target audience for this training are "professional staff" members within public health. Program-level compliance will be monitored through attendance rosters maintained by the office of Organizational Development and Training.

12. Effective public health practice requires that we have the right type of workers available within the organization. The Director of Public Health will establish a team to pursue the goal of having the right mix of positions (_classification_) within our organization.

[r] Success in this element will be achieved through the development and implementation of a plan (systematic approach) to address prioritized "classification" issues. Progress toward success will be measured by monitoring the dates of completion of each of the specified phases.

13. The ability to hire employees (_fill vacant items_) in a timely manner is critical for success. Tracking this effort by key characteristics (e.g., management versus front-line employee) can allow the organization to identify and remove existing barriers.

[s] This element will be evaluated overall as well as within specific categories, as indicated. Data provided by DHS Human Resources will be used to monitor progress in this element.